

**IS NURSING REALLY A PROFESSION? \***

By A. WORCESTER, M.D.

WITHOUT attempting to define the much-abused word "profession," we can all agree that the practice of medicine is rightly so termed; and as the nurse's work is so closely associated with the physician's, let us compare her work with his to see if modern nursing is not also entitled to be ranked as a profession.

The profession of medicine is both an art and a science. Although of equal importance, medical science during the last half century has made such brilliant advances that the art of healing, curing, and comforting the sick and suffering has been too much neglected. Had it not been for the wonderful rise and progress of modern nursing during these same years this medical neglect would have been more glaring. And, even covered as it has been by the lovely assistance of our modern nurses, still this neglect has given warrant for the otherwise amazing growth of unscientific methods of healing and comforting.

A prominent physician told me the other day that henceforth he should devote his time exclusively to consulting practice. When I remarked that then he would be cut off from knowing his patients he replied that such was his desire, that he cared only for their diseases.

That at first sounds rather cold-blooded. But really it is not so. It is now necessary that some physicians shall be wholly devoted to medical science. And it is also of direct advantage to the sick and suffering that those who are so devoted to the science shall not attempt to practise the art of medicine.

On the other hand, no advance or lasting good can come from those who attempt to heal and cure in defiant disregard of the knowledge God has given us. It is only by appropriating for the relief of the patient each successive discovery that the art of medicine can hope to keep pace with medical science.

The profession of nursing, like that of medicine, is an art dependent upon science; but in nursing, important as is the underlying science, the art must always predominate. In nursing there is no such chance as there is in medicine for devotion to pure science.

This essential difference between the two professions complicates the question we are now considering. Had the question been asked a third of a century ago, before the systematic training of nurses in this

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country was begun at the New England Hospital for Women and Children, there is no doubt how it would have been answered. Nursing would then very rightly have been held to be only a trade. Not even the old-time nurses themselves would have claimed that it was anything more, and probably they would have also admitted that it was only a poor trade at that. Other trades could be learned by regular apprenticeship, but nursing had to be picked up in the hard school of experience. There were no teachers of nursing. There was not even a text-book upon the subject.

Women who aspired to be nurses had to depend upon their own wits and upon the chance information they might glean from patients and physicians. From the latter not much could be learned, for few doctors in those days knew much about nursing, and not many know much about it now. But from their patients who in previous sicknesses had been well nursed they could learn something. And, in spite of their pitifully few opportunities for learning, some of the old-time nurses certainly knew a great deal about nursing. Only those who were best fitted by nature and by personal trials undertook the work, and of such only the fittest survived. Nor was this true merely as regards physical strength, although only the iron-bodied could endure the deprivations and irregularities of living that the old nurses accepted as matter of course: it was also true as regards the higher qualities of tact, patience, tenderness, and devotion to duty.

Some few of them, no doubt, were Sairy Gamps, but many of them were splendid nurses. And it is a lasting loss that modern nurses, in their self-complacency, have learned so little from them. But the antipathy between the old-time and the modern nurses is not to be wondered at. Neither could understand the other. The old nurse was never ready either to learn or to teach. How could she be? For readiness to learn on her part would be an admission that she did not know everything, and to any such admission she was constitutionally opposed. Moreover, her capital in trade was her supposed peculiar knowledge of the art of nursing, which she was not fool enough to share with her rivals in business.

On the other hand, modern nurses have been so satisfied with their smattering knowledge of the underlying science of nursing that they too often have followed modern doctors in undervaluing the important art of caring for the sick and suffering. The old-time nurses were mistaken in despising the science, but the modern nurses have been even more foolish in missing their opportunities to learn more of the art of nursing. Many such opportunities are being lost.

The art of nursing is very old. Back through the ages it can be

traced to that first district visiting nurse, Phoebe, whom Paul commended to the Romans for having been a succorer of many, including himself. From generation to generation the art has been handed down. And not only from the few old nurses still in practice, but also from families where little ways of comforting have been inherited much that is precious might yet be garnered for the treasuries of modern training-schools.

Sharp as is the contrast between the old and the new nursing, it must be borne in mind that the new, although really superseding the old, is nevertheless and naturally enough supposed to be merely the successor and so the rightful heir of all the properties. The old-time nursing, as we have seen, was at best only a trade. How then can we claim that modern nursing is a profession? Those of us who do so claim must give our reasons. And this is the task I have undertaken.

Let us first consider what are the essential characteristics that distinguish a profession from a trade.

Galen is rightly called the Father of the profession of medicine. Why? Not because he added much to the stock of medical knowledge. No, but because he formulated his famous oath requiring of his disciples that each in turn should impart to his successors all the knowledge he might acquire. This obligation, after long centuries of observance, is still the most important standard of the medical profession.

When, nearly fifty years ago, Theodor Fliedner, who is rightly called the Father of modern nursing, visited the little Bethesda Hospital in Hamburg he found there beautiful nursing. Some years before Elise Aberdieck had taken into her tiny home her friend's husband, who, having been given up to die in the great city hospital, had been laid on a bed of straw in the damp gas-lit cellar. The poor fellow begged to be carried up into the sunshine, and the two brave women in their distress secured his removal and the care of a kindly surgeon. Almost miraculously the man recovered; but while he was yet sick the surgeon persuaded the women to receive a second patient, and then a third. Before they knew it they had a small hospital on their hands, which soon became famous and rapidly outgrew its successive enlargements. It is amusing to look back at their consternation when first asked to admit a female patient. Up went their hands in horror! They knew how to care for men, but as for women patients, how could they undertake it?

At the time of Fliedner's visit Elise Aberdieck and her friend were rightly proud of the institution, and they confidently expected Fliedner's approval. But after careful inspection of their work he blazed out in righteous wrath. For a time they could not understand him. He declared their work to be useless, and that it might better never have

been undertaken. At last through their tears they saw his meaning: they were not teaching other women to be their successors; they were not professional. But they became so. They took in probationers. And the school they then started is the finest school for nurses I have ever seen on either side the ocean.

When Florence Nightingale, with the thank-offering given by the women of England for her glorious service in the hospital at Scutari, founded the school for nurses at St. Thomas's, where women should be taught what she herself had learned at Kaiserswerth, she established the new profession of nursing among English-speaking people. That was ten years before the profession was established here. But since then progress in this country has been marvellously rapid, for which our gratitude is especially due to Dr. Cowles, who not only inaugurated the great school at the Boston City Hospital, one of the first in this country both in age and in fame, but soon afterwards he also established the now world-wide system of training nurses for the care of the insane.

Is it not plain that modern nursing stands this foremost professional test of providing for the instruction of all who wish to learn to be nurses? Indeed, in what other profession is there such liberal provision made for students? In recognition of the invaluable assistance given by the sister profession, the busiest physicians and surgeons give unsparingly every possible aid in the instruction of student nurses. It is true they look forward with hopeful anticipation to the time when they shall be relieved of much of this work by nurses who, having mastered both the science and the art of nursing, shall undertake all the teaching of their successors.

This thought leads me to point out that one of the obstacles to the recognition of nursing as a profession is this temporary dependence upon the medical profession for teaching in schools for nurses. But already it is plain that only the comparatively unimportant science can be taught by physicians, and that the art of nursing can be taught only by nurses. And now that highly educated women are entering the profession, we shall surely soon have nurses who are at least equally able to teach the science upon which the art of nursing depends.

So much for the teaching test.

Another and closely allied characteristic of a true profession is the sharing with all associates every professional advantage. The lawyer, the clergyman, and the physician delight in giving brotherly help to their fellows. They have associations and meetings for sharing their discoveries and for regulating their professions.

Can modern nurses stand this professional test? I wish I could

answer more positively in the affirmative. There are many hopeful signs. Associations of nurses are forming, nursing journals are at last under the control of nurses, books upon nursing by nurses are increasing, more interest is being shown by nurses in the regulation of their profession. But it must be admitted that progress in this direction has been provokingly slow. The modern nurses too often have followed their predecessors in unprofessional ways. They have not helped each other; they have not given cordial support to the nursing associations and journals that are struggling to advance the profession. They have even allowed themselves to be sent out to service by registries controlled not by nurses and conducted not for the nurses' interests, but for the pecuniary gain of others. In these registries were filed away criticisms of the nurses, perhaps containing reflections upon their characters, which the nurses themselves might never see but which nevertheless determined their careers. So long as nurses meekly submit to such servant intelligence-office treatment it will be difficult to maintain that they appreciate their professional privileges and obligations. However, in all those ways wherein modern nurses have failed to assume full professional responsibilities there is improvement already visible; and, after all, it must not be forgotten that there has as yet been very little time for the metamorphosis of nursing. We who belong to a profession centuries old may well be slow to criticise a profession that has not yet outlived its founders.

Another striking difference between trades and professions is that journeymen believe and maintain that they know all that is to be known in their respective trades, while no member of a profession can possibly beguile himself into imagining that he knows anything like as much about his profession as he ought to know.

How is it with nurses? As they are sent forth from their training-schools are they satisfied with their education? Or do they realize that their education is only just begun, and that throughout their lives they must be learning? And do modern nurses as they go on in their life-work realize more and more that what they know in comparison with what they ought to know is as nothing?

Of course, in applying these tests we must in fairness consider the best nurses. Indeed, I doubt if the members of any profession would care to have their profession otherwise judged. The average always seems low.

Some years ago, when studying training-school methods in England, in my eagerness for advice from Miss Nightingale I wrote, begging for an interview. She replied that she was a helpless invalid, that she had to deny herself the pleasure of seeing even her life-long friends, but she

added, "If you should still wish to see me to give or to receive information on any point [regarding nursing] I would gladly make time to see you."

Could there be found any higher proof than that of true professional zeal and humility? Nor is such proof to be found only in exceptional instances. I doubt not that many present will agree with my own experience that this truly professional spirit now generally characterizes the leading nurses in this country.

There are still other tests that we can apply in deciding this question if nursing is really a profession. Trades are most successfully pursued by those who first seek pecuniary returns. But professions can be successfully followed only by those whose primary incentive is higher. And in the application of this test I am sure all will agree that neither lawyers nor physicians can be found who, in their devotion to the law and to medicine, are more truly inspired than are modern nurses by genuine love for their calling. Probably some women have entered the training-schools attracted by the apparently high wages trained nurses receive. The old-time nurses were no doubt generally driven to nursing for their living. And probably it is at least equally true that men likewise sometimes have entered the legal and medical professions with the same motive. If the law schools and the medical schools paid their students monthly wages, still more would enter these schools simply for the money that might so be earned. A better method than this could hardly be imagined for attracting servants from service and for keeping out of the training-schools the ambitious daughters of self-respecting families. Even theological schools have found it necessary to give up bribing into studentship those who cannot afford other professional education.

It is no wonder that, while schools for nurses find it necessary to pay their students money allowances, nursing is still so generally denied its proper professional status. But happily this custom is passing. And the best training-schools now offer their students, instead of wages, larger educational advantages. The natural result has followed. Young women whose education and ideals are of the highest are now entering these schools. No longer can it be said that no training-schools for nurses afford fitting educational opportunities for college graduates.

But I am already discussing the most important test by which our question is to be decided. For, after all, the real difference between a trade and a profession is in their different educational requirements. A true profession requires a liberal education, and also affords opportunities for gaining it. Can nursing stand this final test?

It is easy enough to criticise the training-schools of the present. None of them require anything like the preliminary education that is

required by other professional schools. And yet it is only within most recent years that more was required by the medical or legal or theological schools. So it would be most unfair to deny true professional status to nursing on this count. That the new profession in its evolution is behind other time-honored professions is no wonder. But its rate of progress is, nevertheless, wonderful.

We must, however, admit that in training-schools for nurses there is still woful lack of uniformity in the curriculums offered and, consequently, in the requirements for diplomas. For the nursing profession there are as yet no government requirements, such as always have safeguarded the legal and latterly have been enacted to safeguard the medical profession. But strong movements are now tending towards such provision in many of the States. And as the nursing associations gain strength, nurses will undoubtedly succeed in bringing the training-schools up to a decent standard. Till then we must admit that nursing is being defrauded of its proper status by the schools that send out their incompletely educated graduates. But here again account must be taken of the prevalent custom of nurses who have had only partial training to take post-graduate instruction in the departments of nursing in which they are ignorant. And further improvement in this same direction is also apparent in the combining of different courses of training, a movement that has already gained considerable headway.

The chief criticism deserved by the training-schools is that they are not primarily and distinctly educational in their purposes and methods. On the one hand, the training-schools of the large hospitals do not give a general training. Some do not include contagious service, some have no midwifery service, while others have only female patients, and almost none pay any attention to the equally important departments of private family nursing and visiting nursing. Indeed, some of the hospitals for special diseases maintain what they call training-schools and graduate their nurses, who, of course, have had no general training, as nurse specialists. This is entirely indefensible. For, while it is quite right for a nurse to devote herself to a specialty, just as it is for a physician to do so, it is similarly not a professional procedure unless she has first had a general training.

On the other hand, in many of the training-schools of the small hospitals which afford more general training the nurses are employed for a part of their studentship as money-earners for supporting the hospitals. It would be hard to say which schools are the worst. Both kinds fail to appreciate the high importance of educational ideals. No truly educational institution can ever be subordinate to utilitarian purposes. What sort of a medical school could be run by a hospital for

the hospital's benefit? It is precisely the same with schools for nursing. If either institution might properly include the other, surely the educational should include the eleemosynary, as is the custom in the deaconess schools for nurses abroad. In this country the cart is ahead of the horse.

But in spite of these grave defects of the training-schools, which admittedly hinder the advance of nursing, even the educational opportunities now offered to student nurses are still not so insufficient as to debar modern nursing from full professional standing. For in nursing it is not the science upon which the art depends, but rather the art itself, that is of most importance. And, as in every other art, so in that of nursing, the art can be learned by the student nurses only in personal imitation of those who possess the art. Until recently it was possible for students to enter the professions of law and of medicine by such apprenticeship to master practitioners. And the saving educational quality of all training-schools is to be found in the opportunities they afford to the students to work under master nurses.

Not to the lay managers of the training-schools, not to the medical staffs of the hospitals, nor even to the volunteer physician instructors, must we look in testing the educational value of the schools for nurses, but rather to the superintendents and to the head nurses under whom and with whom the students are privileged to work.

With our examination thus directed we cannot decide against the schools. For a nobler company, more truly inspired by highest educational and professional ideals, than the superintendents of our American training-schools cannot be found.

We have now applied five tests in our attempt to decide the question if modern nursing is really a profession. And we have found (1) that in teaching their successors, (2) that in sharing professional advantages and in making their own professional regulations, (3) that in acknowledging the need of continuous study, (4) that in pursuing their profession not primarily for pecuniary gain, and (5) that in requiring sufficient education of those who enter the profession, modern nurses have attained full right to professional standing.

But nurses if they desire their professional rights must demand them. For until nurses understand and assume their professional privileges and obligations there is little hope of any general recognition of the fact that nursing is a profession.

When, many years ago, I was admiring the stand taken by a physician who had refused a rich patient's bribes and importunities that he should slightly disregard professional etiquette, the noble old doctor said, "Well, I cannot say that the medical profession has not sometimes



been insulted by the treatment accorded me, but I can truthfully say that I have never allowed a repetition of the offence from the same source."

No kinder man than he ever lived. But he was most sensitive to the honor of the profession he loved and adorned.

In wishing for nurses a like regard for the honor of their profession I would not for anything be understood to advocate that foolish stickling for personal privileges which is sometimes so ludicrously and at the same time almost pathetically manifested.

A graduate nurse lately in expressing her contempt for another remarked: "She don't know nothing. When she arrived she carried her own valise up the stairs."

In their fear of being taken for servants nurses have too often made themselves ridiculous. What matters it to the real nurse at what table she is asked to sit? In some households the most honorable seat is at the servants' table. The nurse who is mindful of her mission will never upset the domestic arrangements of even the most unrefined families. She can well afford to excuse the ignorance of fashion's fools. She has all the privileges of impersonality. But, if she would jealously guard the honor of her honorable profession, she must not for any however high salary undertake lady's-maid service.

Nursing is service to the helpless, but only to such. No physician who values his professional standing will accept valet service. Nor is this obligation of holding strictly to the proper work of one's profession any less binding upon nurses. Unfortunately, this obligation has not been generally recognized. It may well be said, by way of excuse, that it is far more difficult for the nurse than for the physician to hold fast to this standard. The physician has daily chances of withdrawing from service that he finds to be no longer strictly professional. But the nurse who is caught at a case where from the outset merely maid service is needed and expected, or, as more commonly happens, where, after convalescence, there ceases to be need of nursing service, in such situations the nurse may have the greatest difficulty in withdrawing. Moreover, nurses are engaged ahead, not for the period when nursing service shall be needed, but for a certain number of weeks or months, during a part of which time their professional services probably will be needed.

It is not within my present limits to point out the remedies, which I nevertheless believe are within reach, for these hindrances to the professional advance of nursing. I purpose now only to point to the facts. And after making all allowances for these inherent difficulties, the charge must still be made against many modern nurses in private practice that their methods and customs regarding their own employment

are unprofessional. But even if nurses in private practice are admitted to be faulty in this respect, it must not therefrom be inferred that nursing is not a profession. Indeed, were it not a profession, there would be nothing to criticise in these servile business-like customs.

Happily the profession of nursing does not have to be judged by the private nurses alone. There are the district visiting nurses, who have the largest opportunities for exemplifying nursing ideals. If we consider their work, we shall not find anything in it unprofessional. It is the oldest form of nursing and it is the highest. And in deciding this last phase of our question, if modern nurses themselves recognize nursing to be a profession, we surely have the right to take any class of nurses for the test. Let us then rest our case upon the district visiting nurses, who in all parts of the world are so gloriously upholding the highest professional standards. No observer of their work can doubt that they fully realize the fact that nursing is really a profession,—a fact that their work makes most plain.

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## HYGIENE OF THE HOUSEHOLD

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BATHS will be a good subject to talk about this summer weather, as even the very thought of one is refreshing, whether it means a dip in the rolling surf, a cool swim in lake or river, or even the morning plunge in the limited space of a bath-tub.

It is hardly necessary to urge the importance of the daily bath in summer, as it is in winter, for the majority of people are only too glad to be cooled off at any expenditure of time and trouble, but when the weather grows cooler and the water colder it requires a certain amount of moral courage to keep up the daily bath. The habit once formed, however, the loss of the bath will be felt almost as much as the loss of one's breakfast.

In the days long past, "the good old days" (?), as they are still called by some, Saturday was "tub night," and a weekly bath was considered quite sufficient to meet all the requirements of personal cleanliness! indeed, many people regarded it weakening, if not unhealthy, to bathe oftener, but we have learned differently in these days of hygiene and physical culture.

I think we have an excellent example in the regularity with which